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CONFIRMATION NO. 5653

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/538,837		424	1616	04676.0183

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/JP03/15931 12/12/2003

**** FOREIGN APPLICATIONS *******

JAPAN 2002-363158 12/13/2002

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Verified and Acknowledged	/JAMES HENRY ALSTRUM ACEVEDO/ Examiner's Signature	Initials	JAPAN	13	22	7

ADDRESS

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TITLE

Novel dry powder inhalation system for transpulmonary administration

FILING FEE RECEIVED 2400	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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